M000000003069

(F	Requestor's Name)	
(/	Address)	
	,	
(/	Address)	
· (C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	_	_
(E	Business Entity Name)	
	Document Number)	
	·	
0 10 10 1		~
Certified Copies	Certificates of 3	Status
Special Instructions t	o Filing Officer	
		j
		-
	•	

Office Use Only



700159836647

08/31/09--01047--011 **35.00

Amend



7 Soberts SEP 0.1 2009

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Escada at Tib	uron Homeowners Asso	ciation, Inc.
DOCUMENT NUM	BER: N00000003069		, which the state of the state
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Robe	ert Samouce	
	(Name of	Contact Person)	
	Samouce, I	Murrell & Gal, P.A.	
	(Firm	n/ Company)	
-		k Central Court	
	(,	Address)	
		Florida 34109	
	(City/ Sta	te and Zip Code)	
		e@smglawfirm.com ad for future annual report notifica	ation)
For further information	on concerning this matter, pleas	e call:	
Robert Samouce		at (239) _596-952	
(Name	of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Department	of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address	Street Address	
	idment Section ion of Corporations	Amendment Section Division of Corporation	ns
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center	· Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Escada At Tiburon I	Homeowners	Association, Inc.	
(Name of Corporation as cur	rently filed with	the Florida Dept. of Sta	<u>ate</u>)
N0	0000003069		
(Document No	umber of Corporat	ion (if known)	`
Pursuant to the provisions of section 617.100 he following amendment(s) to its Articles of		, this <i>Florida Not For P</i>	<i>rofit Corporation</i> adopts
4. If amending name, enter the new name	of the corporatio	on:	
The new name must be distinguishable and abbreviation "Corp." or "Inc." <u>"Company"</u>			orporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		c/o Keith Ferrari	,
		2531 Escada Court	
		Naples, FL 34109	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		c/o Keith Ferrari	•
• .		2531 Escada Court	
		Naples, FL 34109	·
D. If amending the registered agent and/or new registered agent and/or the new re			ter the name of the
Name of New Registered Agent:	Samouce,	Murrell & Gal, P.A.	<u> </u>
New Registered Office Address:		ark Central Court	_
	·		m 34100
		(City)	_, Florida 34109 (Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as register position.			pt the obligations of the
-			
_	The last San	Registered Agent, if che	
	Page 1 of 3	Jemoree, Minell "	6.1, P.A.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u> <u>Name</u> Address Type of Action ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The.date of each amendment(s) ac	doption:
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s).
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated OP	24/2009 Tritt - Farsani)
(By the chave not	chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, our appointed fiduciary by that fiduciary)
	Keith R. Ferrari
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3